



Placer County Redevelopment Agency
3091 County Center Drive, Suite 260
Auburn, CA 95603

Down Payment Assistance Program Interest Form

(This is not a loan application)

Please read the attached information summary before completing this form.

Date: _____

Name of applicant: _____ Name of co-applicant: _____
(Please include the names of all person(s) who will hold title to property)

Current Address: _____

Phone Number: Home _____ Work _____ Cell _____

Email Address: _____

Total number of all (children and adults) persons residing in the household: _____

Annual Combined Gross Income: _____ Occupation(s): _____
(Include total gross income from all sources for all household members, including wages, SSI, SSA, disability, unemployment, dividends, etc.)

Total monthly payment amount of your revolving credit debt? _____
(Examples: credit cards, car loans, school loans, etc.)

How much are you currently paying for monthly rent? _____

Have you ever filed for Bankruptcy? _____, if yes when? _____
Foreclosure? _____, if yes when? _____

Total amount you currently have available for down payment: _____

Has the applicant or co-applicant owned a home within the past (3) years? _____

Have you been pre-qualified for a home loan? _____ If yes (provide copy of pre-qualification)

Address of property you have identified for purchase in unincorporated Placer County

Total purchase price of this property _____

(If you have questions please contact Placer County Redevelopment Agency @ (530) 745-3170)

The County of Placer does not discriminate in housing or employment on the basis of race, religion, sex, age, national origin or handicap. In compliance with the Americans with Disabilities Act, the County of Placer encourages those with disabilities to participate fully in the County programs and public hearings. If you have special needs in order to allow you to participate in this program, please contact the California Telephone Access Program at 1-800-806-1191 or the County, 530-745-3150, so that we can make every reasonable effort to accommodate you. The County is an Equal Opportunity Lender.

All person 18 years of age or older must sign this form if their information is to be

Signature of Applicant _____

Signature of Co-Applicant _____





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Please identify the following (for statistical purposes only):	
Native American ____	Head of Household: Male: __ Female: __
Caucasian ____	
African American ____	Married ____ Disabled: Y ____
Hispanic ____	Single ____ N ____
Asian ____	
Other ____	Senior ____